RIDGEWOOD CARE CENTER

3205 WOOD RD

RACINE	53406	Phone: (262) 554-6440)	Ownership:	County
Operated from 1	1 To 12/31	Days of Operation:	366	Highest Level License:	Skilled
Operate in Conju	ction with H	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds S	t Up and Sta	affed (12/31/04):	210	Title 18 (Medicare) Certified?	Yes
Total Licensed B	ed Capacity	(12/31/04):	210	Title 19 (Medicaid) Certified?	Yes
Number of Reside	its on 12/31,	/04:	206	Average Daily Census:	206

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	*	Less Than 1 Year	24.3
Supp. Home Care-Personal Care	No					1 - 4 Years	39.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.5	Under 65	17.0	More Than 4 Years	35.9
Day Services	No	Mental Illness (Org./Psy)	38.8	65 - 74	16.0		
Respite Care	No	Mental Illness (Other)	21.8	75 - 84	34.5		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	28.6	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.9	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.5			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	0.0	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	7.3	65 & Over	83.0		
Transportation	No	Cerebrovascular	2.9			RNs	13.8
Referral Service	No	Diabetes	3.4	Gender	%	LPNs	6.9
Other Services	No	Respiratory	1.0			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	23.8	Male	32.0	Aides, & Orderlies	43.8
Mentally Ill	Yes			Female	68.0		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	Yes			İ	100.0		
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Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay	2		amily Care			anaged Care	<u>l</u>		
Level of Care	No.	%	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	2	9.5	248	7	4.2	141	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	9	4.4
Skilled Care	19	90.5	311	148	89.7	120	0	0.0	0	20	100.0	185	0	0.0	0	0	0.0	0	187	90.8
Intermediate				8	4.8	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	3.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				2	1.2	168	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	21	100.0		165	100.0		0	0.0		20	100.0		0	0.0		0	0.0		206	100.0

RIDGEWOOD CARE CENTER

Admissions, Discharges, and		Percent Distribution	ı of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	ssistance of	% Totally	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	4.9		59.2	35.9	206
Other Nursing Homes	1.5	Dressing	11.2		76.7	12.1	206
Acute Care Hospitals	94.2	Transferring	31.6		51.0	17.5	206
Psych. HospMR/DD Facilities	1.5	Toilet Use	20.9		62.1	17.0	206
Rehabilitation Hospitals	1.5	Eating	57.8		28.2	14.1	206
Other Locations	1.5	*******	******	*****	*******	*******	*****
Total Number of Admissions	206	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	4.9	Receiving Resp	iratory Care	10.7
Private Home/No Home Health	21.8	Occ/Freq. Incontinen	it of Bladder	60.7	Receiving Trac	heostomy Care	0.5
Private Home/With Home Health	24.8	Occ/Freq. Incontinen	it of Bowel	41.3	Receiving Suct	ioning	1.5
Other Nursing Homes	3.4				Receiving Osto	my Care	4.4
Acute Care Hospitals	15.0	Mobility			Receiving Tube	Feeding	3.4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	0.0	Receiving Mech	anically Altered Diets	33.5
Rehabilitation Hospitals	0.5						
Other Locations	10.7	Skin Care			Other Resident C	haracteristics	
Deaths	23.8	With Pressure Sores		10.2	Have Advance D	irectives	69.4
Total Number of Discharges		With Rashes		9.2	Medications		
(Including Deaths)	206				Receiving Psyc	hoactive Drugs	65.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Gove	ernment	2	00+	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	8	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.1	93.1	1.05	97.9	1.00	90.5	1.08	88.8	1.10
Current Residents from In-County	98.5	86.2	1.14	83.3	1.18	82.4	1.20	77.4	1.27
Admissions from In-County, Still Residing	23.8	33.0	0.72	26.7	0.89	20.0	1.19	19.4	1.23
Admissions/Average Daily Census	100.0	79.1	1.26	76.8	1.30	156.2	0.64	146.5	0.68
Discharges/Average Daily Census	100.0	78.7	1.27	87.5	1.14	158.4	0.63	148.0	0.68
Discharges To Private Residence/Average Daily Census	46.6	29.9	1.56	34.1	1.37	72.4	0.64	66.9	0.70
Residents Receiving Skilled Care	95.1	89.7	1.06	87.3	1.09	94.7	1.01	89.9	1.06
Residents Aged 65 and Older	83.0	84.0	0.99	86.6	0.96	91.8	0.90	87.9	0.94
Title 19 (Medicaid) Funded Residents	80.1	73.3	1.09	72.7	1.10	62.7	1.28	66.1	1.21
Private Pay Funded Residents	9.7	18.3	0.53	19.2	0.51	23.3	0.42	20.6	0.47
Developmentally Disabled Residents	0.5	2.7	0.18	2.7	0.18	1.1	0.43	6.0	0.08
Mentally Ill Residents	60.7	53.0	1.14	49.5	1.23	37.3	1.63	33.6	1.81
General Medical Service Residents	23.8	18.6	1.28	20.2	1.18	20.4	1.16	21.1	1.13
Impaired ADL (Mean)	47.1	47.5	0.99	50.0	0.94	48.8	0.96	49.4	0.95
Psychological Problems	65.5	69.4	0.94	65.9	0.99	59.4	1.10	57.7	1.14
Nursing Care Required (Mean)	9.2	7.4	1.24	8.0	1.15	6.9	1.33	7.4	1.23